

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
ALCOHOLIC BEVERAGE REGULATION ADMINISTRATION**



INSTRUCTIONS FOR FILING AN ALCOHOLIC BEVERAGE CONTROL (ABC) LICENSE APPLICATION

The following instructions are intended for retail and wholesale applicants who are applying for an Alcoholic Beverage Control (ABC) license. Please note that based upon the sixty day placard period and subsequent investigation, a routine application, with no protests, will take approximately 12 weeks for approval. You must call an ABC Licensing Specialist to schedule an appointment for the submission of your application. Applications will only be accepted when ALL of the information is provided. **To schedule an appointment, call (202) 442-4423 between the hours of 8:30 a.m. and 4:15 p.m. Monday through Friday.**

FEES: All payments can be made in the form of a cashier's check, certified check, business check, attorney's check, personal check, or money order, payable to the D.C. Treasurer, cash, or by credit card (except for American Express).

Application Fee:

The fee varies. Your licensing specialist will provide you with the correct application fee that is due. There is a processing fee of \$75.00. There is a transfer fee of \$250.00.

Entertainment Endorsement fee:

This fee pertains to Restaurants, Hotels and Taverns who are applying for an Entertainment Endorsement for Entertainment, Dancing, or a Cover Charge. Please be advised that Taverns only need an Entertainment Endorsement for Entertainment, a Cover Charge or Dancing, if their dance floor is greater than 140 square feet. The fee varies. This is 20% of the base license fee. This fee is not prorated.

Summer Garden/ Sidewalk Café fee:

The fee is \$75.00. An additional fee of \$50.00 for an inspection fee will be assessed, if the Summer Garden/Sidewalk Café is applied for after the original license is granted.

Tasting fee:

The fee is \$130.00. An additional fee of \$50.00 for an inspection fee will be assessed, if the tasting permit is applied for after the original license is granted.

Brew Pub fee:

The fee is \$3,900.00. An additional fee of \$50.00 for an inspection fee will be assessed, if the brew pub permit is applied for after the original license is granted.

THE APPLICATIONS MUST BE SIGNED BY THE FOLLOWING:

- ? If the applicant is a sole proprietor, the individual must sign.
- ? If the applicant is a partnership, all partners must sign and submit a copy of the partnership agreement.
- ? If the applicant is a corporation, the President or Vice President must sign.
- ? If the applicant is an LLC, the managing member(s) must sign.
- ? If the applicant is a Limited Partnership, the general partner(s) must sign.

GUIDELINES FOR REQUESTING A STIPULATED LICENSE:

An application must be accepted by ABRA before a Stipulated License can be issued by the ABC Board to allow the applicant to sell and serve alcoholic beverages on the premises during the interim of the application process and approval. Only Wholesaler's or Manufacturer's license Class "A" and "B" or Retailer's license Class "C" and "D" may apply for a Stipulated License. The following written correspondence must be submitted to the ABC Board:

- ? The applicant must submit a written request for a stipulated license. The request must include the applicant's name, trade name, and address of the premise.
- ? The applicant must submit written correspondence from the Advisory Neighborhood Commission (ANC) where the establishment is located. The letter should include the ANC's vote with a quorum present, not objecting to or supporting the issuance of a stipulated license prior to the completion of the notice period. The Chairperson of the Advisory Neighborhood Commission must sign this correspondence. The placard period is sixty (60) days, which includes a forty-five (45) day period for community objections.

GENERAL INSTRUCTIONS:

- ? All applications must be filed in duplicate.
- ? **All persons applying for an ABC License must be 21 years of age.**
- ? Applications must be submitted in person. **Please bring valid government issued identification with you.**
- ? Please note the term "**APPLICANT**" as used in this application designates the person or entity in whose name the license will be issued.
- ? Application forms must be notarized where applicable.
- ? **ADVERTISEMENT INSTRUCTIONS:** Upon acceptance of your application, your Licensing Specialist will provide you with placards and instructions for the advertisement. An applicant applying for a new or transfer to a new location must provide notice to the public 60 days prior to receiving the license. This includes placarding the establishment and placing an advertisement in a local newspaper of daily circulation.
- ? Attach extra sheets if necessary. Write, "**see attachment**" in any question, and print name of licensee on the top of each sheet.

NOTE: The D.C. Department of Consumer & Regulatory Affairs (DCRA), Corporations Division, and the Office of Tax and Revenue (OTR) are located at 941 North Capitol Street, NE, 1st Floor, Washington, DC 20002.

SPECIAL NOTICE

The District of Columbia will provide the appropriate services and auxiliary aids, including sign language interpreters, whenever necessary to ensure effective communication with members of the public who are deaf, hearing impaired or who have other disabilities affecting communications. Requests for services and auxiliary aids should be made at least ten days prior to any scheduled hearing. Please notify the ADA Coordinator at (202) 442-4423.

Please read all questions carefully. Each question must be answered. If a question or one portion of the question does not apply; fill in the word "NONE".

ABC APPLICATION:

1. Check the category of license: Manufacturer, Wholesaler, or Retailer;
2. Check the class of license: A, B, C, or D. If you are applying for a Class A or B License, skip to question 5;
3. Check Type: Restaurant, Tavern, Nightclub, Hotel, Club, Multi-Purpose Facility, or Common Carrier;
4. Check box(s) under Entertainment Endorsement if applicable and you are applying for a Restaurant, Tavern, or Hotel License with either Entertainment, Dancing, or a Cover Charge;
5. Check box (s) under Endorsement if applicable: Sidewalk Café, Summer Garden; Tasting, or Brew Pub;
6. Check box(s) under other types if applicable: 404.2, 405.1, Safekeeping, No Substantial Change or Substantial Change;
7. List the number of Seating;
8. List the number of Hotel Rooms;
9. If applicant is the sole proprietor or partnership print individuals name (Last Name, First Name, Middle Initial). If applicant is a business entity, list the entity's name;
10. Print applicant's trade name;
11. Print applicant's business address;
12. Print applicant's mailing address if different from business address;
13. Print applicant's business telephone number;
14. Print applicant's fax number;
15. Print applicant's email address;
16. Check appropriate box for type of applicant: Sole Proprietor, Corporation, Partnership, LLC or Other (LLP & LP);
17. List the name(s), of the Sole Proprietors, or all partners;
18. List the name(s) and titles of all Corporate Officers or LLC Members or General Partners who have an ownership interest; List number of shares; List percentage of interest.
19. List the total number of stocks and shares distributed by Corporation. State number of authorized and the number issued;
20. Check the appropriate box, Yes or No, as to whether any administrative action has been taken against the applicant or any person listed above regarding ABC violations in DC or any state. If yes, please explain what administrative actions were taken, location of action, and the disposition;
21. Certification: If applicant is a sole proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the certification. The certification states "I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above applicant is the true and actual owner of the business." Print your name and have your signature notarized.
22. This vital document is in English, if you need this vital document translated into a different language, please answer the question: In what language do you need vital documents translated?

BUSINESS INFORMATION:

1. Print Business Address;
2. Print Trade Name;
3. Print Floor(s) for area of storage;
4. Print Floor(s) of Licensed business;
5. Check the appropriate box, Yes or No, as to whether you will be the true and actual owner of the business. If no, please explain in an affidavit;
6. Check the appropriate box, Yes or No, as to whether any other business will be conducted on the premises. If yes, please explain fully;
7. Check the appropriate box, Yes or No, if you do now or have previously held a license for the sale of alcoholic beverages. If yes, please explain fully;
8. Check the appropriate box, Yes or No, as to whether any portion of the premises will be used for a dwelling or a lodging house. If yes, check the appropriate box, Yes or No, if there is interior access to the living quarters from the licensed area; If yes, explain fully.
9. Check the appropriate box, Yes or No, if any Manufacturer, Brewery, Distiller, Wholesaler or Solicitor of alcoholic beverages, or any employee thereof, or any other individual or Corporation(s) have any financial interest directly or indirectly in this business or any other business holding an ABC license. If yes, please explain fully;
10. List the Hours of Operation, from Sunday through Saturday under 10a. Please list the Hours of Alcoholic Beverage Sales/Service and Consumption from Sunday through Saturday under 10b. Please list Hours of Live Entertainment occurring or continuing after 6:00 p.m. from Sunday through Saturday under 10c. List the Summer Garden/Sidewalk Cafe Hours of Operation, from Sunday through Saturday under 10d. List the Summer Garden/Sidewalk Cafe Hours of Alcoholic Beverage Sales/Service and Consumption from Sunday through Saturday under 10e. List the Summer Garden/Sidewalk Cafe Hours of Live Entertainment occurring or continuing after 6:00 p.m. from Sunday through Saturday under 10f.
11. If you checked the box for tasting in question 5 in the ABRA Application, initial at the end of this sentence that you understand that your tasting hours may not exceed your approved alcoholic beverage hours;
12. Provide the Name, Address, and Distance (in feet) of the nearest school, public library, day care center, and recreation center;
13. Advise how the distances were measured;
14. Check the appropriate box Yes or No, if there is another ABC licensed establishment of the same class within 400 feet of your establishment. If yes, state name, address and distance. **This is for Class "A" & "B" Only.**
15. Describe the nature of operation, including the type of food served, type of entertainment, including nude performance(s), and any goods and services to be provided. If dancing is provided please indicate dimension of the dance floor(s) and the location(s). **This is for Class "C" & "D" Only.**
16. If you checked "Cover Charge" in Section 4 of in the ABRA application under Entertainment Endorsement and have a Certificate of Occupancy for over Four Hundred (400) persons, provide: (1)Public Hall Certificate of Occupancy from the Zoning Administrator and (2)Entertainment Endorsement for a Public Hall from DCRA. **This is for Restaurants, Hotels & Taverns Only.**

17. Project the gross annual receipts from food sales for the next 12 months and describe how you arrived at that amount under 17a. Project the gross annual receipts from alcoholic beverage sales for the next 12 months and describe how you arrived at that amount under 17b. **This is for Restaurants & Hotels Only.**
18. Give a detailed explanation as to what effect your establishment will have on real property values on the relevant locality, section, or portion of the District of Columbia under 18a. Give a detailed explanation as to what effect your establishment will have on peace, order, and quiet including noise and litter, on the relevant locality, section or portion of the District of Columbia under 18b. Give a detailed explanation as to what effect your establishment will have upon residential parking needs and vehicular traffic and pedestrian safety under 18c.
19. Certification: If applicant is a sole proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the certification. The certification states "I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above applicant is true and actual owner of the business." Print your name and have your signature notarized.

TRANSFER CONSENT FORM:

This must be completed by the Transferor as the pursuant to the license.

1. Check appropriate Category: Manufacturer, Wholesaler, or Retailer;
2. Check appropriate Class: A, B, C, or D if you are applying for Class A or B license, skip to questions 5;
3. Check appropriate Type: Restaurant, Tavern, Night Club, Hotel, Club, Multi-Purpose Facility, or Common Carrier
4. Check appropriate Entertainment Endorsement: Entertainment, Dancing, Cover Charge;
5. Check appropriate box(s) for Endorsement: Sidewalk Café, Summer Garden, Tasting or Brew Pub;
6. Check appropriate box to indicate Other Types: Safekeeping, 404.2, or 405.1;
7. Check appropriate box for Type of Applicant: Sole Proprietor, Corporation, Partnership, LLC or Other (LLP or LP);
8. Print individual or Entity's name (Last Name, First Name, Middle Initial);
9. Print Trade Name of the establishment;
10. Print License Number;
11. Print Business Address;
12. Print Email Address;
13. Check appropriate box, Yes or No, as to whether there has been any administrative action taken against the applicant or any person in the entity regarding ABC violations in the District of Columbia or any state? If yes, please explain what administrative actions were taken, location of action, and disposition;
14. Certification: If applicant is a sole proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the certification which states "I hereby certify under penalty of perjury that the information in this form is true and correct and that the above applicant is the true and actual owner of the business. It is being requested that the Alcoholic Beverage Control Board approved the transfer of this license-print the name of transferee in the blank space. I also represent that there are no pending actions against the license business entity in the Federal or District of Columbia courts or before the ABC Board for violating Title 25 of the D.C. Official Code." Print your name and have your signature notarized.

LANDLORD AFFIDAVIT:

This must be completed by the Landlord:

1. List the address of property upon which business is to be conducted;
2. List the name and address of the true and actual owner of the property ;
3. Check the appropriate box, Yes or No, to indicate if a manufacturer or wholesaler has any direct or indirect financial interest in the property or business, including any money, equipment, furniture, fixtures or property either given, rented or loaned to the landlord. If yes, explain;
4. Check the appropriate box, Yes or No, and provide information as to the owner of the property having any financial interest, directly or indirectly, in the ABC license (i.e. lease, security agreement). If yes, explain. Check the appropriate box, Yes or No, as to whether you hold any other ABC license in the District of Columbia. If yes, explain. Attach copies of any financial interest in the license;
5. Certification: If Landlord is a Sole Proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the certification. The certification states "I hereby certify under penalty of perjury that the information in this affidavit is true and correct and attachments are true and correct." Please print your name and have your signature notarized.

PERSONAL HISTORY AFFIDAVIT:

All applicants including Sole Proprietor, Partner(s), Corporate Officer(s), Director(s), Managing Member(s), General Partner(s), Investor(s), or any other person or any officer in an entity that has an ownership interest of 10% or more must each complete a personal history affidavit.

1. If this is a New Application, check this box;
2. If this is a Transfer Application, check this box;
3. If this is a Stock Transfer Application, check this box ;
4. Print the trade name of the establishment;
5. Print individual's name (Last Name, First Name, Middle Initial);
6. Print individual's title;
7. Print individual's residential address;
8. Print individual's telephone number;
9. Print individual's date of birth;
10. Print individual's place of birth;
11. Check appropriate box, Yes or No, if you are eligible to work in the U.S. If yes, please bring in qualifying documents and provide the information requested in number 12;

12. Check the appropriate box, U.S. passport, naturalization papers, green card, visa, or work permit, and list the certificate number under 12f. and expiration date under 12g.;
 - a. U.S. passport
 - b. naturalization papers
 - c. green card
 - d. visa
 - e. work permit
13. Check appropriate box, Yes or No, for the following questions, "Have you ever":
 - a. received or applied for any alcoholic beverage license in DC or any state;
 - b. had any alcoholic beverage license suspended or revoked;
 - c. been convicted of a misdemeanor during the last five(5) years or a felony during the last ten (10) years. If yes, attach copy of the court disposition;
14. Check appropriate box, Yes or No, as to whether any member of your immediate family now holds an ABC license or has any financial interest, directly or indirectly, in any ABC licensed establishment in DC.
15. Provide explanation if you answered Yes, to questions 13 or 14.
16. Certification: You must sign this certification which states: "Certification: I hereby certify under penalty of perjury that the information in this application is true and correct." Please have your signature notarized.

PERSONAL INFORMATION RELEASE AUTHORIZATION:

Sole proprietor, partner(s), corporate officer(s), director(s) of corporation, managing member(s) and general partner(s) must each complete an information release authorization affidavit.

Complete this form by providing your signature, full name (typed or printed), other names used, social security number, current address, home phone number and date. Have your signature notarized. This form allows ABRA personnel to investigate you and the information contained in this application.

BUSINESS INFORMATION RELEASE AUTHORIZATION:

If the applicant is a Corporation, President or Vice President must sign, if LLC, managing member must sign.

Complete this form by providing the full name of the business entity, the business address, the FEIN number, print your full name and title. Have your signature notarized. This form allows ABRA personnel to investigate you and the information contained in this application.

FINANCIAL AFFIDAVIT:

Provide trade name of the establishment. Please be sure that Section B exceeds Section A. Although you will complete this form, be advised that the Licensing Specialist or the ABC Board may request the actual documentation of the source of the monies.

- A. List the Cost/Expenses for: 1. Purchase Price for Stock/Interest, 2. Down Payment, 3. Amount Financed 4. Working Capital, 5. Inventory. Add lines 1-5 and enter the amount for Total Cost Expenses;
- B. List the total Source of Funds to satisfy the transaction. Total Source Funds must be equal to or greater than the total cost of expenses. 6. Cash on Hand, 7. Savings Account, 8. Checking Account, 9. Certification of Deposit, 10. Promissory Notes, 11. Loans, 12. Other. Add lines 6-12 and enter the amount for Total Source of Funds;
- C. Note: Account for Funds dispersed to satisfy the transaction prior to the application.
- D. If applicant is a Sole Proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the certification which states, "I hereby certify under penalty of perjury that the information in this application is true and correct." Print your name and have your signature notarized.

Bulk Sales Notification (If Applicable): Please read, and have your signature notarized.

ATTORNEY/AGENT DESIGNATION:

Have your attorney/agent complete this form, if applicable.

1. Print applicant/licensee name;
2. Print license number, if applicable;
3. Print trade name;
4. Print establishment's address;
5. Check either box 5 if you are filing an application, check box 6, for representation in contested case(s) other than Protest Hearing, list case number; and box 7 for a Protest Hearing. If you checked box 5, check 5a. Wholesaler, 5b. Retailer, 5c. A, B, C or D, 5d. Caterer, 5e. Entertainment Endorsement, 5f. Tasting, and 5g. Sidewalk Café/ Summer Garden.
6. Contested Case(s);
7. Protest Hearing;
8. Print your name;
9. Print address
10. Print telephone number;
11. Sign your name and date.

OTHER REQUIRED DOCUMENTS:

Police Clearance:

All applicants must obtain a police clearance from the District of Columbia's Metropolitan Police Department, located at 300 Indiana Avenue, N.W., Washington, D.C. 20001. In addition, you must submit a police clearance for the jurisdiction in which you currently reside.

Court Disposition:

All persons with a misdemeanor conviction during the last five (5) years or a felony conviction during the last ten (10) years must submit a copy of the court disposition.

Lease:

A lease is required if you are leasing the space. Please submit copies of the signed lease or letter of intent to lease. All lease documents must be signed by the property owner and contain specific authorization to sell and serve alcoholic beverages on the premises. The lease must be in the applicant's name, i.e., sole proprietor, partnership, LLC, corporation, etc.

Other Licenses:

Submit copies of restaurant, grocery store, delicatessen, public hall, billiards or other business licenses. All Class C & D establishments must have a restaurant license.

Photographs:

Submit 5"X 7" or 7 ½" X 10" photographs depicting the exterior and interior of the premises. Photographs are to be submitted prior to the issuance of the ABC License.

Menu:

If you are applying for a Class C or D license, provide a copy of the menu to substantiate the type of food stated in the application. This pertains to Class C & D only.

Tax Documents :

- ? All applicants must file for a D.C. Business Tax number at the Office of Tax and Revenue (OTR).
- ? All transferors and any transferee's whose entity has been in existence for more than ninety (90) days must submit a Clean Hands Certification from OTR. To expedite this process, ensure that all tax documents are stamped by OTR.

Documents needed from DCRA:

- ? Certified Articles of Incorporation and Certificate of Incorporation must be submitted if you are a Corporation or if the general partner in an LLC is a corporation. Also, minutes with the corporate seal of the Board of Director's meeting verifying the election of the officers and a copy of stock certificates must be submitted.
- ? Articles of Organization, the Operating Agreement, Certificate of Organization and Certificate of Good Standing must be submitted if you are an LLC. Also, minutes of the Board of Director's meeting verifying the election of the officers and a copy of stock certificates must be submitted.
- ? Submit a copy of the Certificate of Occupancy (C of O) from DCRA. If the C of O has not been issued, apply for a Zoning Certificate and submit a letter requesting approval of the license under Section 405.1 of the ABC Regulations. **This pertains to all Class "A", "B", "C", and "D" applications.**

Additional documents required for Summer Garden/Sidewalk Cafe

- ? Copy of Certificate of Occupancy for the number of seats for the establishment and summer garden. Note when applying to DCRA for the summer garden, indicate on the application that you are requesting a summer garden.
- ? Letter from the landlord giving permission to the applicant to sell and serve alcoholic beverages on the summer garden.
- ? Certificate of Use and a Public Space Permit is required for a sidewalk café. This document may be obtained from the District Department of Transportation (DDOT).
- ? A photograph or diagram of the establishment is required denoting the designated area for the summer garden/sidewalk café.
- ? The hours listed may not exceed DDOT or previously ABC Board approved hours.

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GOVERNMENT OF THE DISTRICT OF COLUMBIA ABRA APPLICATION

OFFICIAL USE ONLY

License Number:		Date Accepted:		Accepted by:		Hearing Date:	
Fees Paid: \$	From	To	Issue Date:	From	To		
Date Approved by Board / /	Initial: ↴						
Date Denied by Board / /	Initial: ↴						
Ward/ANC:	___New	___Transfer (new location)	___Transfer With Sale	___Transfer without Sale	___Stock Transfer	___Storage	___Premise

TO BE COMPLETED BY APPLICANT

1. CATEGORY	2. CLASS	3. TYPE		4. ENTERTAINMENT ENDORSEMENT	5. ENDORSEMENT	6. OTHER TYPES
___ Manufacturer ___ Wholesaler ___ Retailer	___ A ___ B ___ C ___ D	___ Restaurant ___ Tavern ___ Nightclub ___ Hotel	___ Club ___ Multi-Purpose Facility ___ Common Carrier	___ Entertainment ___ Dancing ___ Cover Charge	___ Sidewalk Cafe ___ Summer Garden ___ Tasting ___ Brew Pub	___ Safekeeping ___ 404.2 ___ 405.1 ___ No Substantial Change ___ Substantial Change

7. Number of Seating:		8. Number of Hotel Rooms:	
9. Applicant (Last Name, First Name, Middle Initial) or Entity		10. Trade Name	

11. Business Address		12. Mailing Address if different from business	
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13. Business Telephone: ()	14. Fax Number: ()	15. Email Address:
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16. Type of Applicant ___ Sole Proprietor ___ Corporation ___ Partnership ___ LLC ___ Other (LLP or LP)	
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17. List the name of Sole Proprietors and All Partners below.	

18. List all Corporate Officers, LLC Managing Members, General Partners by name and title who have an ownership interest.		Number of Shares	Percent of Interest

19. List the total number of stocks and shares distributed by the Corporation: Authorized _____ Issued _____	
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20. Has there been any administrative action taken against the applicant or any person listed above regarding ABC violations in the District of Columbia or any state? ___ Yes ___ No If yes, please explain what administrative actions were taken, location of action, and the disposition.	
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21. If applicant is a Sole Proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the below certification. Certification: I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above applicant is the true and actual owner of the business.	
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Printed name: _____	
Signature _____	Subscribed and sworn to before me _____ on this ____ day of _____, 20____. Notary Public My commission expires on _____

Printed name: _____	
Signature _____	Subscribed and sworn to before me _____ on this ____ day of _____, 20____. Notary Public My commission expires on _____

Printed name: _____	
Signature _____	Subscribed and sworn to before me _____ on this ____ day of _____, 20____. Notary Public My commission expires on _____

22. In what language do you need vital documents translated?	
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